PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Griffin & Szipl, P.C.				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Suite PH-1						
2300 Ninth Street, South				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being denosited with the United		
Arlington, VA 22204				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
					<u>.</u>	(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INV		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/721,341	11/26/2003		Darryl Gauth	еу	ICB0160	4489
TITLE OF INVENTION:						
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE :	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400)	\$300	\$1700	09/14/2007
EXAMINER		ART UN	TIT	CLASS-SUBCLASS		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND						
					gnee is identified below, the o	locument has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
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4a. The following fee(s) are enclosed:			b. Payment of Fee(s):			
☑ Issue Fee			☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.			
Publication Fee (No small entity discount permitted) Advance Order - # of Copies						
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims S.	(from status indicated above MALL ENTITY status. See	•	☐ b. Applicant is a	no longer claiming SM.	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
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Authorized Signature	hy the			Date Se	otember 14, 2007	
Typed or printed name <u>J</u>	loerg-Uwe Szipl	ROY ROBY	נרוז)	Registratio	on No. <u>31,799</u>	54,407

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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